Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Save America Stop Socialism PAC 413 Shorter Avenue ADDRESS (number and street) Suite 103 (Check if address is changed) Rome 30165 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS saveamericastopsocialism@rtastrategy.com (Check if address is changed) Optional Second E-Mail Address |partner@rtastrategy.com COMMITTEE'S WEB PAGE ADDRESS (URL) SaveAmericaStopSocialism.com (Check if address is changed) DATE 2020 C00755199 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Boles, Jason, D,, Type or Print Name of Treasurer Boles, Jason, D,, [Electronically Filed] Date 15 2021 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Fo	m 1 (Revised 02/2009)	Page 2
TYPE OF C	DMMITTEE Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	mittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	raising Representative:	
und		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the	wo or more political
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	·
		·
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	·
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	·
	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate. mittees Participating in Joint Fundraiser	·
(h) Com	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate. mittees Participating in Joint Fundraiser	·

FEC Form 1 (Revised 02/2009) Write or Type Committee Name	Page 3
Save America Stop Socialism PAC	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	
MARJORIE TAYLOR GREENE'S PEOPLE OVER POLITICIANS COMMITTEE	
PO BOX 1575	
Mailing Address	
ROSWELL GA 30077	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Identify by name, address (phone number optional) and position of the person in phooks and records.	possession of committee
Boles, Jason, D, ,	
Full Name PO Box 1483	
Mailing Address	
Roswell GA 30077	,
Title or Position CITY STATE	ZIP CODE
Treasurer 770 - [330 - 6185
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer).	name and address of
Full Name Boles, Jason, D, , of Treasurer	
Mailing Address PO Box 1483	
Roswell GA 30077	
CITY STATE Title or Position	ZIP CODE
Treasurer 770 - Telephone number -	330 - 6185

FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Rosss Agent	ss, Derek, , ,		
Mailing Address	300 Independence Ave SE		
	Washington		20002
Title or Position Attorney In Fact	CITY	STATE ephone number	ZIP CODE
safety deposit boxes or Name of Bank, Deposit	tory, etc.	he committee deposits fund	ls, holds accounts, rents
Ser	visFirst Bank		
Mailing Address	300 Galleria parkway SE		
	Atlanta	GA 3	30339
	CITY	STATE	ZIP CODE
Name of Bank, Deposito	rory, etc.		
Mailing Address			

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	9		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GREENE, MARJ	ORIE TAYLOR MRS., , ,		
Moiling Address	204 WOODGLEN RD.		
Mailing Address			
	ROME	, GA	30165
Deletienskin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Joint by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Joint by by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Anks or Other Depositor	Affiliated Committee Joint Ty by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee Joint Ty by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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